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OFFICIAL

FAX

DATE: July 19, 2004 Our Ref.: 10/053,182

TO: Examiner John J. Kreck

CO.: USPTO Art Unit 3673

FAX #: 703 872 9326 PHONE #: 703 308 2725

FROM: Karen Tripp

RE: Response to Non-Final Office Action
attached.

NUMBER OF PAGES: 16 (including coversheet)

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PTO/SB/21 (04-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/053,182	
	Filing Date	January 16, 2004	
	First Named Inventor	Mano Shuarpour	
	Art Unit	3673	
	Examiner Name	KRECK, JOHN J.	
Total Number of Pages in This Submission	15	Attorney Docket Number	HALB:031

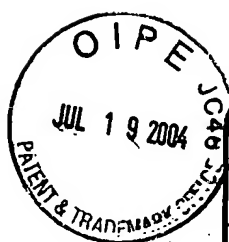
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Karen B. Tripp, Reg. No. 30,452 Attorney at Law
Signature	<i>Karen B. Tripp</i>
Date	July 19, 2004

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Typed or printed name	Karen B. Tripp	Date	July 19, 2004
Signature	<i>Karen B. Tripp</i>		

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PTO/SB/17 (10-03)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$950.00

Complete if Known

Application Number	10/053,182
Filing Date	January 16, 2002
First Named Inventor	Mano Shaarpour
Examiner Name	KRECK, JOHN J.
Art Unit	3673
Attorney Docket No.	HALB:031

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account: if charge cannot be made

Deposit Account Number: 50-0807

Deposit Account Name: Karen B. Tripp

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FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND

Total Claims	Extra Claims	Fee From below	Fee Paid
Independent Claims	-20** = 0	X	0.00
Multiple Dependent	-3** = 0	X	0.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			\$0.00

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 60	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non - English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	950.00
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR § 1.17(d)	
1806 180	1806 180	Submission of Information Disclosure Statement	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR § 1.128(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR § 1.128(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) \$950.00

SUBMITTED BY

Name (Print/Type)	Karen B. Tripp	Registration No. (Attorney/Agent)	30,452	Complete (if applicable)	Telephone	713 658 9323
Signature	<i>Karen B. Tripp</i>	Date	July 19, 2004			

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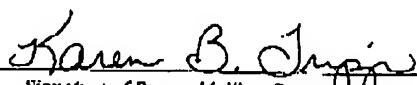
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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. HALB:031	
Applicant(s): Mano Shaarpour					
Application No. 10/053,182	Filing Date January 16, 2002	Examiner KRECK, JOHN J.	Customer No.	Group Art Unit 3073	Confirmation No. 2848
Invention: Method and Composition for Preventing or Treating Lost Circulation					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	20 24 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0807 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: July 19, 2004		
Karen B. Tripp, Reg. No. 30,452 Attorney at Law P.O. Box 1301 Houston, Texas 77251-1301 (713) 658-9323 phone (713) 658-9410 fax ktripp@tripplaw.com			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on <u>July 19, 2004</u> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;"> Signature of Person Mailing Correspondence</p><p style="text-align: center;">Karen B. Tripp Typed or Printed Name of Person Mailing Correspondence</p></div>		
cc: Craig W. Roddy					